

**IN THE UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF TEXAS
DALLAS DIVISION**

In re: § Chapter 7
§
MFF DCK, LLC § Case No. 17-40850
§
Debtor. §
§
§

**DEBTOR'S SUBMISSION OF SCHEDULES OF ASSETS AND LIABILITIES
AND STATEMENT OF FINANCIAL AFFAIRS**

MFF DCK, LLC, debtor herein, hereby submits its Schedules of Assets and Liabilities and Statement of Financial Affairs.

Dated: March 17, 2017

Respectfully submitted,

/ Michael D. Warner

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Attorneys for Debtor

Fill in this information to identify the case:

Debtor name MFF DCK, LLC

United States Bankruptcy Court for the: NORTHERN DISTRICT OF TEXAS

Case number (if known) 17-40850-rfn7

Check if this is an amended filing

Official Form 206Sum
Summary of Assets and Liabilities for Non-Individuals

12/15

Part 1: Summary of Assets

1. Schedule A/B: Assets-Real and Personal Property (Official Form 206A/B)

1a. Real property:

Copy line 88 from *Schedule A/B*..... \$ 0.00

1b. Total personal property:

Copy line 91A from *Schedule A/B*..... \$ 100,000.00

1c. Total of all property:

Copy line 92 from *Schedule A/B*..... \$ 100,000.00

Part 2: Summary of Liabilities

2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D)

Copy the total dollar amount listed in Column A, *Amount of claim*, from line 3 of *Schedule D*..... \$ 3,000.00

3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)

3a. Total claim amounts of priority unsecured claims:

Copy the total claims from Part 1 from line 5a of *Schedule E/F*..... \$ 0.00

3b. Total amount of claims of nonpriority amount of unsecured claims:

Copy the total of the amount of claims from Part 2 from line 5b of *Schedule E/F*..... +\$ 1,941,296.00

4. Total liabilities

Lines 2 + 3a + 3b

\$ 1,944,296.00

Fill in this information to identify the case:

Debtor name MFF DCK, LLC
United States Bankruptcy Court for the: NORTHERN DISTRICT OF TEXAS
Case number (if known) 17-40850-rfn7

Check if this is an amended filing

Official Form 206A/B

Schedule A/B: Assets - Real and Personal Property

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents

1. Does the debtor have any cash or cash equivalents? See Attachment 1

No. Go to Part 2.

Yes Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor

Current value of debtor's interest

3. Checking, savings, money market, or financial brokerage accounts (*Identify all*)

Name of institution (bank or brokerage firm) Type of account

Last 4 digits of account number

3.1. _____

4. Other cash equivalents (*Identify all*) See Attachment 1

5. Total of Part 1.

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

Unknown

Part 2: Deposits and Prepayments

6. Does the debtor have any deposits or prepayments? See Attachment 1

No. Go to Part 3.

Yes Fill in the information below.

7. Deposits, including security deposits and utility deposits
Description, including name of holder of deposit

7.1. See Attachment 1

Unknown

8. Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent
Description, including name of holder of prepayment See Attachment 1

9. Total of Part 2.

Add lines 7 through 8. Copy the total to line 81.

Unknown

Part 3: Accounts receivable

10. Does the debtor have any accounts receivable? See Attachment 1

Debtor MFF DCK, LLC
Name

Case number (If known) 17-40850-rfn7

No. Go to Part 4. See Attachment 1
 Yes Fill in the information below.

Part 4: Investments

13. Does the debtor own any investments?

No. Go to Part 5. See Attachment 1
 Yes Fill in the information below.

Part 5: Inventory, excluding agriculture assets

18. Does the debtor own any inventory (excluding agriculture assets)?

No. Go to Part 6. See Attachment 1
 Yes Fill in the information below.

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)

27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?

No. Go to Part 7.
 Yes Fill in the information below.

Part 7: Office furniture, fixtures, and equipment; and collectibles

38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles? See Attachment 1

No. Go to Part 8.
 Yes Fill in the information below. See Attachment 1

Part 8: Machinery, equipment, and vehicles

46. Does the debtor own or lease any machinery, equipment, or vehicles?

No. Go to Part 9. N/A
 Yes Fill in the information below.

	General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
47.	Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles		None	
48.	Watercraft, trailers, motors, and related accessories Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels		None	
49.	Aircraft and accessories		None	
50.	Other machinery, fixtures, and equipment (excluding farm machinery and equipment) Estimated value; valuation currently in progress			\$100,000.00

51. Total of Part 8.
Add lines 47 through 50. Copy the total to line 87. \$100,000.00

52. Is a depreciation schedule available for any of the property listed in Part 8?
 No
 Yes

Debtor MFF DCK, LLC
Name

Case number (If known) 17-40850-rfn7

53. Has any of the property listed in Part 8 been appraised by a professional within the last year?

No
 Yes

Part 9: Real property

54. Does the debtor own or lease any real property?

No. Go to Part 10.
 Yes Fill in the information below. See Attachment 1 and Attachment 2 (landlords/counterparties to store leases)

55. Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest

Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building, if available).	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
55.1. <u>None</u>		<u>\$0.00</u>		<u>\$0.00</u>

56. Total of Part 9.

Add the current value on lines 55.1 through 55.6 and entries from any additional sheets.
Copy the total to line 88.

\$0.00

57. Is a depreciation schedule available for any of the property listed in Part 9?

No
 Yes

58. Has any of the property listed in Part 9 been appraised by a professional within the last year?

No
 Yes

Part 10: Intangibles and intellectual property

59. Does the debtor have any interests in intangibles or intellectual property? See Attachment 1

No. Go to Part 11.
 Yes Fill in the information below.

Part 11: All other assets

70. Does the debtor own any other assets that have not yet been reported on this form? See Attachment 1
Include all interests in executory contracts and unexpired leases not previously reported on this form.

No. Go to Part 12.
 Yes Fill in the information below.

Debtor MFF DCK, LLC
Name

Case number (If known) 17-40850-rfn7

Part 12: Summary

In Part 12 copy all of the totals from the earlier parts of the form

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. Copy line 5, Part 1	\$0.00	
81. Deposits and prepayments. Copy line 9, Part 2.	\$0.00	
82. Accounts receivable. Copy line 12, Part 3.	\$0.00	
83. Investments. Copy line 17, Part 4.	\$0.00	
84. Inventory. Copy line 23, Part 5.	\$0.00	
85. Farming and fishing-related assets. Copy line 33, Part 6.	\$0.00	
86. Office furniture, fixtures, and equipment; and collectibles. Copy line 43, Part 7.	\$0.00	
87. Machinery, equipment, and vehicles. Copy line 51, Part 8.	\$100,000.00	
88. Real property. Copy line 56, Part 9.....>		\$0.00
89. Intangibles and intellectual property. Copy line 66, Part 10.	\$0.00	
90. All other assets. Copy line 78, Part 11.	+ \$0.00	
91. Total. Add lines 80 through 90 for each column	\$100,000.00	+ 91b. \$0.00
92. Total of all property on Schedule A/B. Add lines 91a+91b=92		\$100,000.00

Debtor	<u>MFF DCK, LLC</u>	Name	Case number (if known)	<u>17-40850-rfn7</u>
<input checked="" type="checkbox"/> No		<input type="checkbox"/> Contingent		
<input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any. \$3,000.00

Part 2: List Others to Be Notified for a Debt Already Listed in Part 1

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address

On which line in Part 1 did you enter the related creditor?

Last 4 digits of account number for this entity

Fill in this information to identify the case:

Debtor name	MFF DCK, LLC
United States Bankruptcy Court for the:	NORTHERN DISTRICT OF TEXAS
Case number (if known)	17-40850-rfn7

Check if this is an amended filing

Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Assets - Real and Personal Property (Official Form 206A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

No. Go to Part 2.
 Yes. Go to line 2.

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

Amount of claim

3.1	Nonpriority creditor's name and mailing address Admiral Linen 2030 Kipling Houston, TX 77098	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,001.00
	Date(s) debt was incurred _____	Basis for the claim: _____	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2	Nonpriority creditor's name and mailing address Airgas USA, LLC. P.O. Box 602792 Charlotte, NC 28260-2792	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$142.00
	Date(s) debt was incurred _____	Basis for the claim: _____	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.3	Nonpriority creditor's name and mailing address Amerisource P.O. Box 4738 c/o BaronHR, LLC. Houston, TX 77210-4738	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$109,578.00
	Date(s) debt was incurred _____	Basis for the claim: <u>Temporary labor</u>	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.4	Nonpriority creditor's name and mailing address Aramark - Four Oaks Place 1330 Post Oak Place Houston, TX 77056	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00
	Date(s) debt was incurred _____	Basis for the claim: _____	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor	MFF DCK, LLC	Case number (if known)	17-40850-rfn7
Name			
3.5	Nonpriority creditor's name and mailing address Aramark - Lennox International 2140 Lake Park Blvd Richardson, TX 75080	As of the petition filing date, the claim is: Check all that apply.	\$0.00
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
Date(s) debt was incurred _____			
Last 4 digits of account number _____			
Basis for the claim: _____			
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
3.6	Nonpriority creditor's name and mailing address Atmos PO BOX 790311 Saint Louis, MO 63179-0311	As of the petition filing date, the claim is: Check all that apply.	\$0.00
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
Date(s) debt was incurred _____			
Last 4 digits of account number _____			
Basis for the claim: _____			
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
3.7	Nonpriority creditor's name and mailing address Berlin Packaging LLC P.O. Box 95584 Chicago, IL 60694-5584	As of the petition filing date, the claim is: Check all that apply.	\$109,504.00
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
Date(s) debt was incurred _____			
Last 4 digits of account number _____			
Basis for the claim: <u>Packaging</u>			
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
3.8	Nonpriority creditor's name and mailing address Caddell Electric 3730 Dilido Rd. Ste #210 Dallas, TX 75228	As of the petition filing date, the claim is: Check all that apply.	\$2,078.00
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
Date(s) debt was incurred _____			
Last 4 digits of account number _____			
Basis for the claim: _____			
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
3.9	Nonpriority creditor's name and mailing address Chandler's Air Conditioning & Refrigerat 1702 W. Fifth St Santa Ana, CA 92703	As of the petition filing date, the claim is: Check all that apply.	\$7,791.00
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
Date(s) debt was incurred _____			
Last 4 digits of account number _____			
Basis for the claim: <u>Repairs and maintenance</u>			
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
3.10	Nonpriority creditor's name and mailing address Connell Chevrolet 2828 Harbor Blvd. Costa Mesa, CA 92626	As of the petition filing date, the claim is: Check all that apply.	\$1,846.00
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
Date(s) debt was incurred _____			
Last 4 digits of account number _____			
Basis for the claim: _____			
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
3.11	Nonpriority creditor's name and mailing address Cozzini Brothers 350 Howard Ave. Des Plaines, IL 60018-8000	As of the petition filing date, the claim is: Check all that apply.	\$2,822.00
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
Date(s) debt was incurred _____			
Last 4 digits of account number _____			
Basis for the claim: _____			
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Debtor	MFF DCK, LLC Name	Case number (if known)	17-40850-rfn7
3.12 Nonpriority creditor's name and mailing address D Commercial Refrigeration PO Box 7124 Fort Worth, TX 76111		As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$2,235.00
Date(s) debt was incurred _____		<input type="checkbox"/> Contingent	
Last 4 digits of account number _____		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		Basis for the claim: _____	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.13 Nonpriority creditor's name and mailing address Dal-Worth Industries, Inc. P.O. Box 5504 Arlington, TX 76005		As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$747.00
Date(s) debt was incurred _____		<input type="checkbox"/> Contingent	
Last 4 digits of account number _____		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		Basis for the claim: _____	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.14 Nonpriority creditor's name and mailing address DataSpan Holdings, Inc. P.O. Box 845507 Dallas, TX 75284		As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$272.00
Date(s) debt was incurred _____		<input type="checkbox"/> Contingent	
Last 4 digits of account number _____		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		Basis for the claim: _____	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.15 Nonpriority creditor's name and mailing address Deen Wholesale Meat Co. 813 E. Northside Dr. Fort Worth, TX 76102		As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$118,097.00
Date(s) debt was incurred _____		<input type="checkbox"/> Contingent	
Last 4 digits of account number _____		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		Basis for the claim: <u>Goods sold</u>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.16 Nonpriority creditor's name and mailing address ECOLAB Institutional P.O. Box 70343 Chicago, IL 60673-0343		As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$8,601.00
Date(s) debt was incurred _____		<input type="checkbox"/> Contingent	
Last 4 digits of account number _____		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		Basis for the claim: <u>Cleaning supplies</u>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.17 Nonpriority creditor's name and mailing address EcoSure 26397 Network Place Chicago, IL 60673-1263		As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$1,000.00
Date(s) debt was incurred _____		<input type="checkbox"/> Contingent	
Last 4 digits of account number _____		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		Basis for the claim: _____	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.18 Nonpriority creditor's name and mailing address Element Financial Corp. P.O. Box 100363 Atlanta, GA 30384-0363		As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$8,591.00
Date(s) debt was incurred _____		<input type="checkbox"/> Contingent	
Last 4 digits of account number _____		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		Basis for the claim: <u>Gas cards for drivers</u>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor	MFF DCK, LLC	Case number (if known)	17-40850-rfn7
Name			
3.19	Nonpriority creditor's name and mailing address EPIC Provision, LLC. 1902 S. Congress Ave. Ste. #D Austin, TX 78704	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$9,828.00
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: Goods sold	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.20	Nonpriority creditor's name and mailing address Family Tree Produce 5510 East La Palma Ave. Anaheim, CA 92807-2108	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$64,361.00
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: Produce	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.21	Nonpriority creditor's name and mailing address Fiesta Tortillas P.O. Box 17563 Austin, TX 78760	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$5,381.00
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: Goods sold	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.22	Nonpriority creditor's name and mailing address Food Safety Net Services P.O. Box 678642 Dallas, TX 75267	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$1,129.00
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: _____	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.23	Nonpriority creditor's name and mailing address Fullenweider Wilhite PC 4265 San Felipe Street Houston, TX 77027	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$0.00
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: _____	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.24	Nonpriority creditor's name and mailing address G&K - Dallas PO Box 842385 Boston, MA 02284-2385	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$81,074.00
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: Linens/Supplies	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.25	Nonpriority creditor's name and mailing address G&K - Los Angeles PO Box 842385 Boston, MA 02284-2385	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$4,984.00
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: Supplies/Linens	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor	MFF DCK, LLC	Case number (if known)	17-40850-rfn7
Name			
3.26	Nonpriority creditor's name and mailing address Garden Fresh Restaurant Corp dba Souplan 15822 Bernardo Center Dr. Ste. #A San Diego, CA 92127	As of the petition filing date, the claim is: Check all that apply.	\$0.00
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: _____	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.27	Nonpriority creditor's name and mailing address Grainger DEPT: 881335079 PO BOX 419267 Kansas City, MO 64141-6267	As of the petition filing date, the claim is: Check all that apply.	\$4,684.00
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: <u>Supplies</u>	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.28	Nonpriority creditor's name and mailing address Grapevine Ford 801 E. Hwy 114 Grapevine, TX 76051	As of the petition filing date, the claim is: Check all that apply.	\$757.00
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: _____	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.29	Nonpriority creditor's name and mailing address Hardie's Fruit & Vegetable Co - Dallas PO Box 671554 Dallas, TX 75267-1554	As of the petition filing date, the claim is: Check all that apply.	Unknown
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: _____	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.30	Nonpriority creditor's name and mailing address Hardie's Fruit & Vegetable Co. c/o McCarron & Diess Attn: Kate Ellis 4530 Wisconsin Avenue NW, Suite 301 Washington, DC 20016	As of the petition filing date, the claim is: Check all that apply.	Unknown
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: <u>Good sold (\$232,808.77) - total claim is aggregated between MFF DCK USA, LLC, and affiliated debtors, My Fit Foods USA, LLC, My Fit Foods, LLC, My Fit Foods California, LLC, and Fit Dog, LLC</u>	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.31	Nonpriority creditor's name and mailing address Hardie's Fruit & Vegetable Co., LP c/o Sherman & Yaquinto 509 N. Montclair Ave. Dallas, TX 75208	As of the petition filing date, the claim is: Check all that apply.	\$0.00
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: <u>Notice only</u>	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.32	Nonpriority creditor's name and mailing address Hygiena, LLC. 941 Avenida Acaso Camarillo, CA 93012	As of the petition filing date, the claim is: Check all that apply.	\$3,327.00
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: <u>Supplies</u>	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor	Case number (if known)	17-40850-rfn7
MFF DCK, LLC Name		
3.33 Nonpriority creditor's name and mailing address Imperial, LLC 2020 North Mingo Tulsa, OK 74116	As of the petition filing date, the claim is: Check all that apply.	\$0.00
Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	Basis for the claim: _____	
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.34 Nonpriority creditor's name and mailing address Infinite Packaging Group P.O. Box 472 Catoosa, OK 74015	As of the petition filing date, the claim is: Check all that apply.	\$38,474.00
Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	Basis for the claim: Packaging	
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.35 Nonpriority creditor's name and mailing address Interactions 9555 Chesapeake Dr. Ste #100 Los Angeles, CA 90189-4511	As of the petition filing date, the claim is: Check all that apply.	\$1,467.00
Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	Basis for the claim: _____	
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.36 Nonpriority creditor's name and mailing address Kitchen Equipment Solutions 1915 Westridge Dr. Irving, TX 75038	As of the petition filing date, the claim is: Check all that apply.	\$15,660.00
Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	Basis for the claim: Repair services	
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.37 Nonpriority creditor's name and mailing address Las Colinas Co. 600 S. Jefferson St. #M Placentia, CA 92870	As of the petition filing date, the claim is: Check all that apply.	\$125.00
Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	Basis for the claim: _____	
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.38 Nonpriority creditor's name and mailing address Lawton Commercial Services, L.P. 1444 N. Central Expressway McKinney, TX 75070	As of the petition filing date, the claim is: Check all that apply.	\$193.00
Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	Basis for the claim: _____	
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.39 Nonpriority creditor's name and mailing address Liquid Environmental Solutions P.O. Box 203371 Dallas, TX 75320-3371	As of the petition filing date, the claim is: Check all that apply.	\$815.00
Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	Basis for the claim: _____	
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor	Case number (if known)	
MFF DCK, LLC	17-40850-rfn7	
Name		
3.40 Nonpriority creditor's name and mailing address Logic-Track Systems 2435 N. Central Expy. Ste. #1200 Richardson, TX 75080	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,135.00
Date(s) debt was incurred _____	Basis for the claim: _____	
Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.41 Nonpriority creditor's name and mailing address Louisiana Foods 10310 Greens Crossing Blvd. Houston, TX 77038	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$46,587.00
Date(s) debt was incurred _____	Basis for the claim: <u>Raw materials</u>	
Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.42 Nonpriority creditor's name and mailing address Luxor Staffing 1430 Valwood Pkwy. Ste #120 Carrollton, TX 75006	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$157,273.00
Date(s) debt was incurred _____	Basis for the claim: <u>Labor staffing</u>	
Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.43 Nonpriority creditor's name and mailing address LVC, Inc. 1647 W. Dion Dr. Phoenix, AZ 85086	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$151,219.00
Date(s) debt was incurred _____	Basis for the claim: <u>Packaging</u>	
Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.44 Nonpriority creditor's name and mailing address Midwest Foods 3100 W. 36th St. Chicago, IL 60632	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$7,275.00
Date(s) debt was incurred _____	Basis for the claim: <u>Produce</u>	
Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.45 Nonpriority creditor's name and mailing address Mile High Food Science, LLC. 1191 Nuclea Street Aurora, CO 80011	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,779.00
Date(s) debt was incurred _____	Basis for the claim: _____	
Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.46 Nonpriority creditor's name and mailing address My Fit Foods Payroll, LLC PO Box 61027 Potomac, MD 20859	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown
Date(s) debt was incurred _____	Basis for the claim: <u>Intercompany payable</u>	
Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor	MFF DCK, LLC	Case number (if known)	17-40850-rfn7
Name			
3.47	Nonpriority creditor's name and mailing address My Fit Foods USA, LLC PO Box 61027 Potomac, MD 20859	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown
Date(s) debt was incurred _____		Basis for the claim: Intercompany payable	
Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.48	Nonpriority creditor's name and mailing address My Fit Foods, LLC PO Box 61027 Potomac, MD 20859	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown
Date(s) debt was incurred _____		Basis for the claim: Intercompany payable	
Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.49	Nonpriority creditor's name and mailing address National L.S. Inc. P.O. Box 840352 Houston, TX 77284	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$4,195.00
Date(s) debt was incurred _____		Basis for the claim: HEB Lumper	
Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.50	Nonpriority creditor's name and mailing address Nicol Scales, L.P. P.O. Box 222288 Dallas, TX 75222-2288	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,264.00
Date(s) debt was incurred _____		Basis for the claim: _____	
Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.51	Nonpriority creditor's name and mailing address Nitel, Inc. Lockbox Dept 4929 Carol Stream, IL 60122-4629	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$578.00
Date(s) debt was incurred _____		Basis for the claim: _____	
Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.52	Nonpriority creditor's name and mailing address Occumed Plus - Grand Prairie P.O. Box 462052 Garland, TX 75046	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$345.00
Date(s) debt was incurred _____		Basis for the claim: _____	
Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.53	Nonpriority creditor's name and mailing address Office Depot P.O. Box 630813 Cincinnati, OH 45263-0813	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$143.00
Date(s) debt was incurred _____		Basis for the claim: _____	
Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor	Case number (if known)	17-40850-rfn7
3.54 Nonpriority creditor's name and mailing address PCM Business Direct File #55327 Los Angeles, CA 90074 Date(s) debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$354.00
3.55 Nonpriority creditor's name and mailing address PV Roadrunner,LLC. 12425 N. Cave Creek Rd. Phoenix, AZ 85022 Date(s) debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Packaging</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,124.00
3.56 Nonpriority creditor's name and mailing address Ready Refresh P.O. Box 856158 Louisville, KY 40285 Date(s) debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$85.00
3.57 Nonpriority creditor's name and mailing address Reliable Refrigeration Services, Inc. 913 E. Juanita Ave. Ste. #1 Mesa, AZ 85204 Date(s) debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,664.00
3.58 Nonpriority creditor's name and mailing address Resource Employment Solutions 5900 Lake Ellenor Dr. Ste. #100 Orlando, FL 32809 Date(s) debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Temporary labor [lawsuit? does this need to go on SOFA #22?] Please provide additional info.</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$95,671.00
3.59 Nonpriority creditor's name and mailing address Ricoh USA, Inc. P.O. Box 660342 Dallas, TX 75266-0342 Date(s) debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.60 Nonpriority creditor's name and mailing address S3 Sanitation Cleaning, LLC. 12700 Hillcrest Rd. Ste#230 Dallas, TX 75230 Date(s) debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Cleaning services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$29,314.00

Debtor	Case number (if known)
MFF DCK, LLC Name	17-40850-rfn7
3.61 Nonpriority creditor's name and mailing address Santa Monica Seafood Company 18531 S. Broadwick St. Compton, CA 90220	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
Date(s) debt was incurred _____	Basis for the claim: <u>Seafood sold</u>
Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.62 Nonpriority creditor's name and mailing address SCG River Park Business Center, L.P. P.O. Box 847551 Dallas, TX 75284-7551	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
Date(s) debt was incurred _____	Basis for the claim: <u>Rent</u>
Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.63 Nonpriority creditor's name and mailing address SCL Cold Chain P.O. Box 2630 Grapevine, TX 76099	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
Date(s) debt was incurred _____	Basis for the claim: <u>Delivery services</u>
Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.64 Nonpriority creditor's name and mailing address SLM Waste & Recycling Services, Inc. 5000 Commerce Dr Green Lane, PA 18054	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
Date(s) debt was incurred _____	Basis for the claim: <u>Dumpsters</u>
Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.65 Nonpriority creditor's name and mailing address Speedpro Imaging 2553 E. Loop 820 N Fort Worth, TX 76118	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
Date(s) debt was incurred _____	Basis for the claim: _____
Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.66 Nonpriority creditor's name and mailing address Staples Advantage Dept. DAL P.O. Box 83689 Chicago, IL 60696	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
Date(s) debt was incurred _____	Basis for the claim: <u>Office supplies</u>
Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.67 Nonpriority creditor's name and mailing address Stern Produce Co., Inc. 3200 S. 7th St. Phoenix, AZ 85040	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
Date(s) debt was incurred _____	Basis for the claim: <u>Produce</u>
Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	Case number (if known)	
MFF DCK, LLC Name	17-40850-rfn7	
3.68 Nonpriority creditor's name and mailing address SunRich Foods International Corp. 1240 N. Barsten Way Anaheim, CA 92806	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods sold</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$99,741.00
3.69 Nonpriority creditor's name and mailing address SYSCO - Arizona (049) 1390 Enclave Pkwy Sysco Corporation ATTN: Doug Walker Houston, TX 77077	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,480.00
3.70 Nonpriority creditor's name and mailing address Sysco - Chicago (024)	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,671.00
3.71 Nonpriority creditor's name and mailing address SYSCO - Dallas (006) 1390 Enclave Pkwy Sysco Corporation ATTN: Doug Walker Houston, TX 77077	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Raw materials</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$20,401.00
3.72 Nonpriority creditor's name and mailing address SYSCO - Los Angeles (045) 1390 Enclave Pkwy Sysco Corporation ATTN: Doug Walker Houston, TX 77077	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$81.00
3.73 Nonpriority creditor's name and mailing address Terra Spice Company PO Box 3556 South Bend, IN 46619	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,261.00
3.74 Nonpriority creditor's name and mailing address The Boelter Companies, Inc. N22 W23685 Ridgeview Pkwy W Waukesha, WI 53188-1013	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Packaging and supplies</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$456,251.00

Debtor	MFF DCK, LLC Name	Case number (if known)	17-40850-rfn7
3.75	Nonpriority creditor's name and mailing address Toyota Industries Commercial Finance, In Dept 2431 Carol Stream, IL 60132-2431	As of the petition filing date, the claim is: Check all that apply.	\$514.00
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		Basis for the claim: _____	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.76	Nonpriority creditor's name and mailing address ULINE PO Box 88741 Chicago, IL 60680-1741	As of the petition filing date, the claim is: Check all that apply.	\$12,958.00
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		Basis for the claim: Office/kitchen supplies	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.77	Nonpriority creditor's name and mailing address UNFI P.O. Box 742930 Los Angeles, CA 90074-2930	As of the petition filing date, the claim is: Check all that apply.	\$84,887.00
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		Basis for the claim: Raw materials	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.78	Nonpriority creditor's name and mailing address UNFI - Chicago P.O. Box 706 Keene, NH 03431	As of the petition filing date, the claim is: Check all that apply.	\$1,504.00
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		Basis for the claim: _____	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.79	Nonpriority creditor's name and mailing address United Service Technologies Inc. 21801 Cactus Ave. Ste. A Riverside, CA 92508	As of the petition filing date, the claim is: Check all that apply.	\$1,789.00
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		Basis for the claim: _____	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.80	Nonpriority creditor's name and mailing address USDA - Food Safety & Inspection Svc US Bank - FSIS Lockbox P.O. Box 979001 Saint Louis, MO 63197-9001	As of the petition filing date, the claim is: Check all that apply.	\$0.00
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		Basis for the claim: _____	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.81	Nonpriority creditor's name and mailing address Victory Packaging P.O. Box 844138 Dallas, TX 75284-4138	As of the petition filing date, the claim is: Check all that apply.	\$25,828.00
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		Basis for the claim: Packaging	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor **MFF DCK, LLC**
Name

Case number (if known)

17-40850-rfn7

3.82	Nonpriority creditor's name and mailing address VideoJet Technologies, Inc. 12113 Collection Center Dr Chicago, IL 60693	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$4,099.00
	Date(s) debt was incurred _____	Basis for the claim: Machinery	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.83	Nonpriority creditor's name and mailing address Weather Masters, Inc. 155 East Broadway Mesa, AZ 85210	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$70.00
	Date(s) debt was incurred _____	Basis for the claim: _____	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.84	Nonpriority creditor's name and mailing address Wells Fargo Vendor P.O. Box 650016 Dallas, TX 75265-0016	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$264.00
	Date(s) debt was incurred _____	Basis for the claim: _____	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

Name and mailing address

On which line in Part 1 or Part 2 is the related creditor (if any) listed?

Last 4 digits of account number, if any

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 1

Total of claim amounts
5a. \$ **0.00**

5b. Total claims from Part 2

5b. + \$ **1,941,296.00**

5c. Total of Parts 1 and 2

5c. \$ **1,941,296.00**

Lines 5a + 5b = 5c.

Fill in this information to identify the case:

Debtor name MFF DCK, LLC

United States Bankruptcy Court for the: NORTHERN DISTRICT OF TEXAS

Case number (if known) 17-40850-rfn7

Check if this is an amended filing

Official Form 206G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.
 Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B). See below.

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1 State what the contract or lease is for and the nature of the debtor's interest

See Attachment 1

See Attachment 1 and Attachment 2
(landlords/
counterparties to the
various store leases)

State the term remaining

List the contract number of any government contract

2.2 State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract

2.3 State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract

2.4 State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract

Fill in this information to identify the case:

Debtor name MFF DCK, LLC

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Official Form 206H

Schedule H: Your Codebtors

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Do you have any codebtors?

No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.
 Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

Column 1: Codebtor

Column 2: Creditor

	Name	Mailing Address	Name	Check all schedules that apply:
2.1	Fit Dog, LLC	PO Box 61027 Potomac, MD 20859	Hardie's Fruit & Vegetable Co.	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.30</u> <input type="checkbox"/> G _____
2.2	My Fit Foods California, LLC	PO Box 61027 Potomac, MD 20859	Hardie's Fruit & Vegetable Co.	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.30</u> <input type="checkbox"/> G _____
2.3	My Fit Foods USA, LLC	PO Box 61027 Potomac, MD 20859	Hardie's Fruit & Vegetable Co.	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.30</u> <input type="checkbox"/> G _____
2.4	My Fit Foods, LLC	PO Box 61027 Potomac, MD 20859	Hardie's Fruit & Vegetable Co.	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.30</u> <input type="checkbox"/> G _____
2.5	Various Debtor Affiliates	See Attachment 1	Various Landlords/ Counterparties See Attachment 2	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F _____ <input checked="" type="checkbox"/> G _____

Fill in this information to identify the case:

Debtor name MFF DCK, LLC

United States Bankruptcy Court for the: NORTHERN DISTRICT OF TEXAS

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Check if this is an amended filing

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- Schedule H: Codebtors* (Official Form 206H)
- Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- Amended Schedule*
- Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- Other document that requires a declaration*

I declare under penalty of perjury that the foregoing is true and correct.

Executed on March 17, 2017

X


Signature of individual signing on behalf of debtor

Daryl Ribeiro
Printed name

Chief Financial Officer
Position or relationship to debtor